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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	11:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for mple, your driver's ase or passport). If your picture tification to your eting with the trustee.	Jason First name J. Middle name Shelander Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N)	xxx-xx-6131	

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Case number (if known) Debtor 1 Jason J. Shelander

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs.		
		■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	24112 N. Forest Dr.	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Lake County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known)

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

J ()	Jason J. Shelanue	7 1					
	Tell the Court About						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chap	oter 7				
		☐ Chap	oter 11				
		☐ Chap	oter 12				
		☐ Chap	oter 13				
8.	How you will pay the fee	neck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money ehalf, your attorney may pay with a credit card or check with					
		☐ In			ption, sign and attach the Application for Individuals to Pay		
			J	,	tion only if you are filing for Chapter 7. By law, a judge may,		
					your income is less than 150% of the official poverty line the e in installments). If you choose this option, you must fill out		
					official Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.	District	When	Coco number		
			District District	When When	Case number Case number		
			District	When	Case number		
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor		Relationship to you		
			District	When	Case number, if known		
			Debtor _		Relationship to you		
			District	When	Case number, if known		
11.	Do you rent your	■ No.	Go to line	12.			
	residence?	☐ Yes.	Has vour I	landlord obtained an eviction judgment aga	inst you and do you want to stay in your residence?		
		<u> </u>	,		, ,		

No. Go to line 12.

bankruptcy petition.

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Page 4 of 49 Document Case number (if known) Debtor 1 Jason J. Shelander

Part	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
				Number, Street, City, State & ZIP Code			
	it to this petition.		Chec	Check the appropriate box to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it c deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance s operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, fo in 11 U.S.C. 1116(1)(B).			a small business debtor, you must attach your most recent balance sheet, statement of				
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is						
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?			
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
For example, do you own perishable goods, or livestock that must be fed, Where i or a building that needs urgent repairs?		Where is	s the property?				
	·				Number, Street, City, State & Zip Code		

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Debtor 1 Jason J. Shelander

Document Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-39328 Doc 1 Filed 12/14/16 Entered 12/14/16 12:47:24 Desc Main Document Page 6 of 49 Case number (if known) Debtor 1 Jason J. Shelander Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Jason J. Shelander		
Jason J. Shelander Signature of Debtor 1	Signature of Debtor 2	
Executed on December 14, 2016	Executed on	

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Jason J. Shelander

Case number (if known)

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	December 14, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
David M. Siegel		
Printed name		
David M. Siegel & Associates		
Firm name		
790 Chaddick Drive		
Wheeling, IL 60090		
Number, Street, City, State & ZIP Code		
Contact phone (847) 520-8100	Email address	
#06207611		
Bar number & State		

Fill in this information to identify your case:

Debtor 1

Debtor 2

(Spouse if, filing)

Description:

Descriptio

☐ Check if this is an amended filing

Official Form 106Sum

Case number

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

ı aı	t 1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	20,449.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	20,449.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	13,005.00
	Your total liabilities	\$	13,005.00
Pai	t 3: Summarize Your Income and Expenses	ļ	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,373.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,373.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal,	family, or

the court with your other schedules.

Official Form 106Sum

Summary of You

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

Debtor 1 Jason J. Shelander Document Page 9 of 49
Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	300 10 00020	Documer	nt Page 10 of 49	12/14/16 12:22P
Fill in this inforr	nation to identify your	case and this filing:		
Debtor 1	Jason J. Sheland			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS	
Case number _				☐ Check if this is an amended filing
Official Fo	rm 106A/B			
Schedul	e A/B: Prop	erty		12/15
hink it fits best. B nformation. If more Answer every ques	e as complete and accura e space is needed, attach stion.	ate as possible. If two married a separate sheet to this form.	ce. If an asset fits in more than one category, I people are filing together, both are equally res. On the top of any additional pages, write your or Have an Interest In	ponsible for supplying correct
	<u> </u>	<u></u>	uilding, land, or similar property?	
_		e interest in any residence, bu	muling, land, or similar property:	
No. Go to Par				
☐ Yes. Where is	s the property?			
Part 2: Describe	Your Vehicles			
someone else driv	ves. If you lease a vehic		cles, whether they are registered or not? e G: Executory Contracts and Unexpired Lea s	
■ M.				
■ No □ Yes				
□ Tes				
			Il vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories	es
■ No				
☐ Yes				
	-		ries from Part 2, including any entries for	\$ CO CO
Part 3: Describe	Your Personal and Hous	ehold Items		
Do you own or h	have any legal or equit	able interest in any of the	following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Ma		, linens, china, kitchenware		
Yes. Desci	ribe			
	Househo	d Goods & Furniture		\$600.00
	<u> </u>			

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Debtor 1	Jason J. Shelander	nent Page 1	1 of 49 Case number (if known	12/14/16 12:22F
	TV & Electronics			\$400.00
Exam _i ■ No	tibles of value ples: Antiques and figurines; paintings, prints, or other ar other collections, memorabilia, collectibles s. Describe	artwork; books, pictures	, or other art objects; stamp, coi	n, or baseball card collections;
Exam _i ■ No	ment for sports and hobbies oles: Sports, photographic, exercise, and other hobby ec musical instruments s. Describe	quipment; bicycles, po	ol tables, golf clubs, skis; canoes	s and kayaks; carpentry tools;
■ No	rms nples: Pistols, rifles, shotguns, ammunition, and related of the control of t	equipment		
□ No	nes nples: Everyday clothes, furs, leather coats, designer we s. Describe	ear, shoes, accessorie	3	
	Normal Clothing			\$500.00
■ No □ Yes 13. Non-1 Exar ■ No □ Yes	mples: Everyday jewelry, costume jewelry, engagement r s. Describe farm animals mples: Dogs, cats, birds, horses s. Describe			gold, silver
■ No	other personal and household items you did not alress. Give specific information	eady list, including an	y health aids you did not list	
	I the dollar value of all of your entries from Part 3, inc Part 3. Write that number here			\$1,500.00
Part 4:	Describe Your Financial Assets			
	own or have any legal or equitable interest in any of t	the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash				

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

■ No

☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

■ Yes......Institution name:

Desc Main Case 16-39328 Doc 1 Filed 12/14/16 Entered 12/14/16 12:47:24 Document Page 12 of 49 Case number (if known) Debtor 1 Jason J. Shelander **Checking Account Inland Bank** \$10.00 Checking 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. $\hfill \square$ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No ■ Yes. List each account separately. Institution name: Type of account: 401(k) **ERISA Qualified** \$1.064.00 401(k) Retirement Plan 401(k) **ERISA Qualified** \$5.870.00 401(k) Retirement Plan **IRA ERISA Qualified** \$3,209,00 I.R.A 401(k) **ERISA Qualified** \$6,524.00 401(k) Retirement Plan

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No	
☐ Yes	Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No ☐ Yes. Give specific information about them...

Debtor 1	Case 16-3932		Filed 12/14/16 Document	Entered 12/14/16 12:47:24 Page 13 of 49 Case number (if known)	Desc Main 12/14/16 12:22PM
Exam ■ No	its, copyrights, trademannples: Internet domain nar	mes, websites, p			
<i>Exam</i> ■ No	ses, franchises, and oth nples: Building permits, ex	clusive licenses		n holdings, liquor licenses, professional licens	es
Money or	r property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	efunds owed to you Give specific information	n about them, in	cluding whether you alre	ady filed the returns and the tax years	
■ No		7, 1	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
<i>Exam</i> ■ No	amounts someone owenples: Unpaid wages, disabenefits; unpaid loads. Give specific informatio	ability insurance ans you made to		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
	ests in insurance policienples: Health, disability, or		health savings account (HSA); credit, homeowner's, or renter's insurar	nce
■ Yes	. Name the insurance cor C	npany of each p ompany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
	v	/hole Life Ins	urance Policy	Kevin Shelander (Father)	\$2,272.00
If you some ■ No	nterest in property that is a re the beneficiary of a list one has died. Give specific information	iving trust, expe		ed surance policy, or are currently entitled to rec	eive property because
<i>Exam</i> ■ No	nples: Accidents, employn	nent disputes, in		it or made a demand for payment s to sue	
	 Describe each claim contingent and unliquion 		every nature, includin	g counterclaims of the debtor and rights to	set off claims

35. Any financial assets you did not already list

■ No
□ Yes. Give specific information..

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Describe each claim.......

■ No

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Case number (if known) Document Jason J. Shelander

36.	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here	\$18,949.00						
Part	5: Describe Any Business-Related Property You Own or Have an Intere	st In. List any real esta	ate in Part 1.					
7. [o you own or have any legal or equitable interest in any business-related	d property?						
	No. Go to Part 6.							
	Yes. Go to line 38.							
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You On If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.					
6.	Oo you own or have any legal or equitable interest in any farm- o	or commercial fishir	ng-related property?					
	■ No. Go to Part 7.							
	☐ Yes. Go to line 47.							
Part	7: Describe All Property You Own or Have an Interest in That You	Did Not List Above						
3.	Oo you have other property of any kind you did not already list?							
_	Examples: Season tickets, country club membership							
_	No							
L	Yes. Give specific information							
54.	Add the dollar value of all of your entries from Part 7. Write that	t number here		\$0.00				
Part	8: List the Totals of Each Part of this Form							
55.	Part 1: Total real estate, line 2			\$0.00				
56.	Part 2: Total vehicles, line 5	\$0.00						
57.	Part 3: Total personal and household items, line 15	\$1,500.00						
58.	Part 4: Total financial assets, line 36	\$18,949.00						
59.	Part 5: Total business-related property, line 45	\$0.00						
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00						
61.	Part 7: Total other property not listed, line 54 +	\$0.00						
62.	Total personal property. Add lines 56 through 61	\$20,449.00	Copy personal property to	otal \$20,449.00				
63.	3. Total of all property on Schedule A/B. Add line 55 + line 62 \$20,449.00							

Debtor 1

	Cas	se 16-39328 Doc 1	1 Filed 12/14/1 Document		Entered 12/14/16 12:47:		4/16 12:22P
Fil	l in this inform	ation to identify your case:					
De	ebtor 1	Jason J. Shelander	Middle Name		ast Name		
	ebtor 2 ouse if, filing)	First Name	Middle Name		_ast Name		
Un	ited States Ban	kruptcy Court for the: NOF	RTHERN DISTRICT OF	ILLIN	OIS		
	nse number					☐ Check if this is ar amended filing	1
	fficial For c <mark>hedul</mark> e	m 106C c C: The Prope	erty You Cla	im	as Exempt		4/16
nee cas For spe any fun exe to t	ded, fill out and e number (if known e number (if known e certain	attach to this page as many open). property you claim as exempount as exempt. Alternative atutory limit. Some exemption limited in dollar amount. He	on the property of the propert	e ame full fa heal exer	our source, list the property that you cage as necessary. On the top of any abount of the exemption you claim. Of ir market value of the property being the aids, rights to receive certain be notion of 100% of fair market value determined to exceed that amount,	additional pages, write your nate of the way of doing so is to stang exempted up to the amount of the and tax-exempt retire under a law that limits the	ame and ate a unt of ement
1.	Which set of	exemptions are you claiming	g? Check one only, eve	n if yo	our spouse is filing with you.		
	You are cla	iming state and federal nonba	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are cla	iming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any prope	erty you list on Schedule A/	B that you claim as exe	empt,	fill in the information below.		
		n of the property and line on hat lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemp	tion
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
		Goods & Furniture	\$600.00	•	\$600.00	735 ILCS 5/12-1001(b)	
	Line from Sch	edule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	TV & Electro		\$400.00		\$400.00	735 ILCS 5/12-1001(b)	
	Line from Sch	euule A/B. I . I			100% of fair market value, up to		

Line from Schedule A/B: 17.1

Normal Clothing

Inland Bank

Line from Schedule A/B: 11.1

Checking: Checking Account

\$1,064.00

\$500.00

\$10.00

\$1,064.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$500.00

\$10.00

735 ILCS 5/12-1006

735 ILCS 5/12-1001(a)

735 ILCS 5/12-1001(b)

100% of fair market value, up to any applicable statutory limit

Case 16-39328

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Case number (if known) Document

escription of the property and line on the A/B that lists this property	Current value of the			
re A/B that lists this property	portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
: ERISA Qualified Retirement Plan	\$5,870.00		\$5,870.00	735 ILCS 5/12-1006
om Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
RISA Qualified	\$3,209.00		\$3,209.00	735 ILCS 5/12-1006
om Schedule A/B: 21.3			100% of fair market value, up to any applicable statutory limit	
: ERISA Qualified	\$6,524.00		\$6,524.00	735 ILCS 5/12-1006
om Schedule A/B: 21.4			100% of fair market value, up to any applicable statutory limit	
Life Insurance Policy	\$2,272.00		\$2,272.00	735 ILCS 5/12-1001(b)
om Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
			led on or after the date of adjustmer	nt.)
es. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	Retirement Plan om Schedule A/B: 21.2 ERISA Qualified om Schedule A/B: 21.3 : ERISA Qualified Retirement Plan om Schedule A/B: 21.4 e Life Insurance Policy iciary: Kevin Shelander (Father) om Schedule A/B: 31.1 u claiming a homestead exemption on the to adjustment on 4/01/19 and every 3	ERISA Qualified Retirement Plan Im Schedule A/B: 21.2 ERISA Qualified Im Schedule A/B: 21.3 ERISA Qualified Im Schedule A/B: 21.3 ERISA Qualified Retirement Plan Im Schedule A/B: 21.4 ELife Insurance Policy Iciary: Kevin Shelander (Father) Im Schedule A/B: 31.1 Extra Claiming a homestead exemption of more than \$160,37 at to adjustment on 4/01/19 and every 3 years after that for cate	ERISA Qualified Retirement Plan Im Schedule A/B: 21.2 ERISA Qualified String Qualified Im Schedule A/B: 21.3 ERISA Qualified Im Schedule A/B: 21.3 ERISA Qualified Retirement Plan Im Schedule A/B: 21.4 ELife Insurance Policy Iciary: Kevin Shelander (Father) Im Schedule A/B: 31.1 Extra Claiming a homestead exemption of more than \$160,375? Into adjustment on 4/01/19 and every 3 years after that for cases fire	ERISA Qualified Retirement Plan Im Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit

		DOGUITE	<u>:11 Paue 17 01 49</u>	<u> </u>			
Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Jason J. Sheland	ler					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS				
Case number (if known)				☐ Check if this is an			
				amended filing			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Cas	se 16-39328		iled 12/14/1	6 Entere	ed 12/14/16 12:47:	24 Des	c Main	12/14/16 12:22PM
Fill in	this inform	ation to identify your		Document	Page	8 01 49			
Debto	I I	Jason J. Sheland First Name	er Middle N	lame	Last Name				
Debto	r 2								
(Spouse	if, filing)	First Name	Middle N	lame	Last Name				
United	States Ban	kruptcy Court for the:	NORTHER	N DISTRICT OF I	LLINOIS				
Cooo									
(if know	number 			_			пс	heck if this	is an
							_	mended filir	
Ott: -	:-! =	4005/5							
	ial Form		lba Hava	Linaaauraa	d Claima			4.	NA E
		F: Creditors W				Part 2 for creditors with NONF			2/15
Schedu left. Atta	lle D: Creditor ach the Conti nd case num	rs Who Have Claims Sec	ured by Prope ge. If you have	rty. If more space is no information to r	s needed, copy	any creditors with partially se the Part you need, fill it out, n do not file that Part. On the to	umber the ent	tries in the b	oxes on the
		s have priority unsecure							
_	No. Go to Pa								
_	Yes.								
		of Your NONPRIORIT	Y Unsecured	d Claims					
3. Do	any creditor	s have nonpriority unse	cured claims a	gainst you?					
	No. You have	e nothing to report in this p	art. Submit this	form to the court wit	h your other sch	edules.			
	Yes.								
un: tha	secured claim	, list the creditor separatel	y for each claim	. For each claim liste	ed, identify what t	holds each claim. If a credito ype of claim it is. Do not list clai three nonpriority unsecured cla	ms already inc	luded in Part	1. If more
								Total claim	1
4.1		e Good Shepherd F	lospital	Last 4 digits of ac	count number	7147			\$3,270.00
		Creditor's Name t Highway 22		When was the de	ht incurred?	10/15 - 10/16			
		on, IL 60010		Wildir was the ac	ot incurred.	10/13 - 10/10		-	
		eet City State Zlp Code		As of the date you	u file, the claim i	s: Check all that apply			
	_	red the debt? Check one.							
	Debtor 1	,		☐ Contingent					
	Debtor 2	•		☐ Unliquidated					
		and Debtor 2 only		☐ Disputed					
	At least	one of the debtors and an	other	Type of NONPRIC	RITY unsecured	d claim:			
	☐ Check in	f this claim is for a com	munity	☐ Student loans	dan and de				
		subject to offset?		■ Obligations aris report as priority cl		ration agreement or divorce tha	ıt you ald not		
	■ No			☐ Debts to pension	on or profit-sharin	g plans, and other similar debts	;		
	☐ Yes			Other. Specify	Collections	;			

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Document

Page 19 of 49 Case number (if know)

Advocate Health Care	Last 4 digits of account number	7852	\$1,298.00
Nonpriority Creditor's Name PO Box 4248	When was the debt incurred?	7/16 - 10/16	
Carol Stream, IL 60197-4248			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify Medical		
Associates in Nephrology, SC	Last 4 digits of account number	2622	\$585.00
Nonpriority Creditor's Name 2100 S Des Plaines,	When was the debt incurred?	8/16 - 10/16	
1st Floor		3,10 10,10	
Chicago, IL 60661	_		
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
_			
■ Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed	ط ماه نص	
At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	u ciaiii.	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
Barrington Anes Assoc.	Last 4 digits of account number	1974	\$300.00
Nonpriority Creditor's Name		7/10 10/10	
PO Box 66202 Chicago, IL 60666	When was the debt incurred?	7/16 - 10/16	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Medical		

Debtor 1 Jason J. Shelander

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Best Buy Credit Services		Last 4 digits of account number	9346	\$863.00			
	Nonpriority Creditor's Name PO Box 78009	When was the debt incurred?	9/16 - 10/16				
	Phoenix, AZ 85062-8009						
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	ng plans, and other similar debts				
	☐ Yes	Other Specify Purchases					
4.6	Cardiothoracic & Vascular Surgical Nonpriority Creditor's Name	Last 4 digits of account number	7147	\$130.00			
	PO Box 3722	When was the debt incurred?	9/16 - 10/16				
	Springfield, IL 62708-3722 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Medical					
4.7	First Bank Card	Last 4 digits of account number	8751	\$2,192.00			
	Nonpriority Creditor's Name		Opened 5/01/15 Last Active				
	PO Box 2557	When was the debt incurred?	8/08/16				
	Omaha, NE 68103-2557						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	a plane, and other circles delta				
	■ No	Debts to pension or profit-sharin	ig pians, and other similar debts				
	☐ Yes	Other. Specify Purchases					

Debtor 1 Jason J. Shelander

Case 16-39328 Doc 1 Filed 12/14/16 Entered 12/14/16 12:47:24 Desc Main Document Page 21 of 49 Case number (if know)

Jason J. Shelandel		Case Humber (II know)	
Integrated Imaging Consultant, LLC	Last 4 digits of account number	4737	\$790.00
Nonpriority Creditor's Name 44000 Garfield Road Clinton Township, MI 48038	When was the debt incurred?	8/16 - 10/16	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
\square Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		
Lake Zurich Rural Fire Protection Nonpriority Creditor's Name	Last 4 digits of account number	1522	\$571.00
PO Box 457 Wheeling, IL 60090-0457	When was the debt incurred?	10/15 - 10/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Services		
Orthopaedic Surgery Specialist	Last 4 digits of account number	4498	\$2,240.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ=,= 10100
1550 N. Northwest Highway Suite 220 Park Ridge, IL 60068	When was the debt incurred?	8/16 - 10/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
\square Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Medical		

Entered 12/14/16 12:47:24

Desc Main Document Page 22 of 49 Case number (if know) Debtor 1 Jason J. Shelander Pulmonary & Critical Care 4.1 \$766.00 Last 4 digits of account number Consultan Nonpriority Creditor's Name 700 E Ogden When was the debt incurred? 10/16 Suite 205 Westmont, IL 60559-1296 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Best Buy/CBNA** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6497 Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117-6497 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Cap1/BSTBY Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 30253 ■ Part 2: Creditors with Nonpriority Unsecured Claims Salt Lake City, UT 84130 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address State Collection Service Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2509 S. Stoughton Road Part 2: Creditors with Nonpriority Unsecured Claims Madison, WI 53716-3314 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim**

	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
IIOIII Fait I				Φ	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	S	0.00
		,			
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total				Ψ	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			2.22
	Ū	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.		12 005 00
		here.		\$	13,005.00

Debtor 1 Jason J. Shelander Document Page 23 of 49 Case number (if know)

6j. **Total Nonpriority.** Add lines 6f through 6i. 6j. \$______**13,005.00**

Page 24 of 49 Document Fill in this information to identify your case: Debtor 1 Jason J. Shelander First Name Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	City		State	Zii Code	
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
					·

	Case 10-33320 1	Docume		12/14/10 12.47.24 of 49	12/14/16 12:22PM
Fill in thi	s information to identify your				
Debtor 1	Jason J. Sheland	ler			
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, fi	ling) First Name	Middle Name	Last Name		
Jnited St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nun	nber				
if known)					Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	ebtors			12/15
70110	<u> </u>	001010			12/10
II it out, a our nam	e filing together, both are equ and number the entries in the e and case number (if known)	boxes on the left. Attach . Answer every question.	the Additional Page to	o this page. On the top of a	
1. Do	you have any codebtors? (If	you are filing a joint case, c	do not list either spouse	as a codebtor.	
■ No □ Ye					
	thin the last 8 years, have you na, California, Idaho, Louisiana				tes and territories include
■ No	o. Go to line 3.				
☐ Ye	es. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make	sure you have listed the cr	th you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The credito Check all schedules tha	r to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
<u> </u>	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street			_	

State

City

ZIP Code

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						_				
	in this information to identify your captor 1 Jason J. Sho									
		eiander			_					
	otor 2 buse, if filing)				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number		_			Check	k if this is:			
(If kr	nown)					l	n amende	J		
									g postpetition Ilowing date	
0	fficial Form 106I					M	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome					, 22, .			12/15
atta	use. If you are separated and you ch a separate sheet to this form. **T1: Describe Employment**									
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fili	ing spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	yed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not er	mployed		
	employers.	Occupation	Forklift Driver							
	Include part-time, seasonal, or self-employed work.	Employer's name	Aerotek Staffing	g Agend	су					
	Occupation may include student or homemaker, if it applies.	Employer's address	D&W Fine Pack 800 Ela Road Lake Zurich, IL							
		How long employed to	here? 11/16				_			
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any	line, write	\$0 in the	space. Incl	ude your no	on-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for t	that perso	n on the lin	es below. If	you need
						For Deb	otor 1	For Deb non-filin	tor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,	760.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	- -

1,760.00

N/A

4. Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Jason J. Shelander	-	Case	number (if kn	own)				
					Debtor 1		non-	Debtor 2 filing spo	ouse	
	Сор	y line 4 here	4.	\$	1,760	.00	\$		N/A	
5.	List	all payroll deductions:								
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	387 0	.00	\$		N/A N/A	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$.00	\$		N/A N/A	
	5e.	Insurance	5e.	\$	0	.00	\$		N/A	
	5f.	Domestic support obligations Union dues	5f.	\$_ \$.00	\$		N/A	
	5g. 5h.	Other deductions. Specify:	5g. 5h.+	· · · · · ·		.00	+ \$		N/A N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	387	.00	\$		N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,373	.00	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0	.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$-		.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0	.00	\$		N/A	
	8d.	Unemployment compensation	8d.	\$.00	\$		N/A	
	8e.	Social Security	8e.	\$	0	.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0	.00	\$		N/A	
	8g.	Pension or retirement income	 8g.	\$.00	\$		N/A	
	8h.	Other monthly income. Specify:	8h	+ \$	C	.00	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0	.00	\$		N/A	<u>\</u>
10.		•	10. \$		1,373.00	+ \$_		N/A =	\$	1,373.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.								
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your in friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	deper	,	,		•		/. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							\$	1,373.00
									ombin nonthly	ed y income
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?							

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	in this information to identify your case:				
Deb	Jason J. Shelander			ck if this is: An amended filing	
	otor 2ouse, if filing)		_	•	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINO	IS	-	MM / DD / YYYY	
	se numbernown)				
Of	fficial Form 106J				
So	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this formber (if known). Answer every question. 1: Describe Your Household				
1.	Is this a joint case?				
	No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses f</i>	or Separate Househ	old of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.			_	☐ Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
Par	t 2: Estimate Your Ongoing Monthly Expenses				
Est exp	imate your expenses as of your bankruptcy filing date unless your bankruptcy is filed. If this is a supple blicable date.				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I: Young to the comment of the comm</i>			Your expe	enses
(On	ficial Form 106I.)			Tour oxp	
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4. \$	S	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	3	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$	3	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hom 	e equity loans	4d. \$ 5. \$		0.00
J.	Additional mortgage payments for your residence, such as nom	io o quity 10a115	J. 4	,	U.UU

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Electricity, heat, natural gas Water, sewer, garbage collection	6a. 6b.		0.00
Electricity, heat, natural gas Water, sewer, garbage collection			0.00
Water, sewer, garbage collection			
	DD.	\$	0.00
Telephone, cell phone, Internet, satellite, and cable services	6c.		110.00
Other. Specify:	6d.		0.00
d and housekeeping supplies	7.	·	350.00
dcare and children's education costs	8.		0.00
hing, laundry, and dry cleaning	9.	\$	109.00
- · · · · · · · · · · · · · · · · · · ·			
•		·	75.00
•	11.	Φ	54.00
	12.	\$	600.00
· •		·	75.00
			0.00
<u> </u>		Ψ	0.00
	15a.	\$	0.00
Health insurance	15b.	\$	0.00
		·	0.00
			0.00
			0.00
	16.	\$	0.00
		· 	
	17a.	\$	0.00
Car payments for Vehicle 2	17b.	\$	0.00
	17c.	\$	0.00
	17d.	\$	0.00
		· —	
	18.	\$	0.00
r payments you make to support others who do not live with you.		\$	0.00
ify:	19.		
er real property expenses not included in lines 4 or 5 of this form or on Sche			
Mortgages on other property	20a.	\$	0.00
Real estate taxes	20b.	\$	0.00
	20c.	\$	0.00
Maintenance, repair, and upkeep expenses	20d.	\$	0.00
Homeowner's association or condominium dues	20e.	\$	0.00
er: Specify:	21.	+\$	0.00
			4 070 00
•			1,373.00
		·	
Add line 22a and 22b. The result is your monthly expenses.		\$	1,373.00
ulate your monthly net income			
	232	\$	1,373.00
			1,373.00
John Monthly expenses non-line 226 above.	۷۵۵.		1,373.00
Subtract your monthly expenses from your monthly income			
	23c.	\$	0.00
	conal care products and services ical and dental expenses isportation. Include gas, maintenance, bus or train fare. of include car payments. of include car payments. of trainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. of include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify: esliment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: other. Specify: r payments of alimony, maintenance, and support that you did not report as a facted from your pay on line 5, Schedule I, Your Income (Official Form 106I). or payments you make to support others who do not live with you. cify:	tonal care products and services ical and dental expenses sportation. Include gas, maintenance, bus or train fare. of include car payments. ritable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance of include insurance deducted from your pay or included in lines 4 or 20. Life insurance Other insurance Of include taxes deducted from your pay or included in lines 4 or 20. Life insurance Other insurance. Specify: Life insurance Other insurance. Specify: Life insurance Other insurance of 15c. Other insurance of 15c. Other insurance of 15c. Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Topayments of alimony, maintenance, and support that you did not report as sucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Life payments you make to support others who do not live with you. Life: Life payments you make to support others who do not live with you. Life: Life payments you make to support others who do not live with you. Life: Life payments you make to support others who do not live with you. Life: Life payments you make to support others who do not live with you. Life: Life payments you make to support others who do not live with you. Life: Life payments you make to support others who do not live with you. Life payments you make to support others who do not live with you. Life: Life payments you make to support others who do not live with you. Life payments you make to support others who do not live with you. Life payments you make to support others who do not live with you. Life payments you make to support others who do not live with you. Life payments you make to support others who do not live with you. Life payments you make to support others who do not live with you. Life payments you make to support your mother your mother your mother your mother your mo	conal care products and services ical and dental expenses sportation. Include gas, maintenance, bus or train fare. of include car payments. rtainment, clubs, recreation, newspapers, magazines, and books rtaince. of include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Health insurance Other insurance, specify: 15c. \$ Other insurance, specify: 15d. \$ Illiment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: 17d. \$ Other. Specify: 17d. \$ If yayments of alimony, maintenance, and support that you did not report as lacted from your pay on line 5, Schedule I, Your Income (Official Form 106I). If yayments ou make to support others who do not live with you. If yayments you make to support to support that you did not report as lacted from your pay on line 5, Schedule I, Your Income (Official Form 106I). In real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Description of the support of the su

☐ Yes.

Explain here:

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Fill in this inforr	nation to identify your	case:			
Debtor 1	Jason J. Sheland	er			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official Forn		ın Individual	Debtor's So	chedules	12/15
If two married ne	onle are filing together	r, both are equally respon	nsible for supplying co	rrect information	
ii two marrieu pe	sopie are ming together	, both are equally respon	iisible for supplying co	rrect information.	
obtaining money		n connection with a bank			ement, concealing property, or 0, or imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. N	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	lty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules fil	ed with this declaratio	on and
X /s/ Jase	on J. Shelander		X		
Jason	J. Shelander re of Debtor 1		Signature o	f Debtor 2	

Date

Date **December 14, 2016**

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Fill in this info	ormation to identify you	r case:			
Debtor 1	Jason J. Shelan	der			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case number					
(if known)				_	Check if this is an amended filing
Official E	form 107				
Official F		Affairs for Individ	duals Filing for B	ankruntcy	4/1
Be as complet information. I number (if known	e and accurate as poss f more space is needed, own). Answer every que	ible. If two married people a attach a separate sheet to	are filing together, both are this form. On the top of an	equally responsible for sup	oplying correct
	our current marital statu		Lived Delote		
_ `		19 :			
☐ Marri ■ Not r	ied narried				
2. During th	e last 3 years, have you	lived anywhere other than	where you live now?		
□ No	List all of the places you l	lived in the last 3 years. Do no	et inglude where you live new		
	, ,	ŕ	,		
Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	V. Shady Lane Irich, IL 60047	From-To: 10/15 - 02/16	☐ Same as Debtor	ı	☐ Same as Debtor 1 From-To:
states and terri No Yes.	<i>tories</i> include Arizona, Ca	ver live with a spouse or legulifornia, Idaho, Louisiana, Nethedule H: Your Codebtors (Of Income	vada, New Mexico, Puerto R		
Fill in the to the first	total amount of income yo	nployment or from operatin ru received from all jobs and a have income that you receive	all businesses, including part	time activities.	endar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	y 1 of current year until filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

☐ Operating a business

Official Form 107

Case 16-39328

Page 32 of 49 Case number (if known) Document Debtor 1 Jason J. Shelander

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions exclusions)	s and	Sources of inco		Gross income (before deductions and exclusions)
	r last calen nuary 1 to		31, 2015)	■ Wages, commissions, bonuses, tips	\$17,41	5.00	☐ Wages, common bonuses, tips	missions,	
				☐ Operating a business			Operating a b	ousiness	
	r the calend nuary 1 to			■ Wages, commissions, bonuses, tips	\$14,10	9.00	☐ Wages, common bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a b	ousiness	
	and other winnings. I	public bene f you are fili	fit payments; ing a joint cas he gross inco	ner that income is taxable. Expensions; rental income; integer and you have income that ome from each source separa	erest; dividends; mone you received together	y collecte , list it or	ed from lawsuits; rolly once under De	oyalties; and btor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	Gross income fro each source (before deductions exclusions)		Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
	r last calen nuary 1 to		31, 2015)	Unemployment	\$6,07	6.00			
	r the calend nuary 1 to			Unemployment	\$7,32	29.00			
Pai	rt 3: List	Certain Pa	vments You	Made Before You Filed for	Bankruptcy				
			•						
Ò.	No.	Neither De	ebtor 1 nor D	's debts primarily consume bebtor 2 has primarily cons personal, family, or househo	umer debts. Consum	er debts	are defined in 11	U.S.C. § 10 ⁴	(8) as "incurred by an
		•	•	re you filed for bankruptcy, o	lid you pay any credito	r a total	of \$6,425* or mor	e?	
		□ _{No.} □ _{Yes}	Go to line 7	each creditor to whom you pa	aid a total of \$6.425* or	r more in	one or more navi	ments and th	ne total amount vou
			paid that cre not include	editor. Do not include payme payments to an attorney for ton 4/01/19 and every 3 years.	nts for domestic supporthis bankruptcy case.	ort obliga	ations, such as chi	ld support a	nd alimony. Also, do
	■ Yes.			r both have primarily cons		r a total	of \$600 or more?		
		■ No.	Go to line 7						
		□ Yes	include pay	each creditor to whom you pa ments for domestic support of this bankruptcy case.					
	Creditor's	s Name and	d Address	Dates of paym		ount paid	Amount you still owe	Was this p	ayment for

Debtor 1 Jason J. Shelander Document Page 33 of 49

Case number (if known)

7.	Within 1 year before you filed for bankrupter Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners partners partners of their votin	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations agent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pal	t 4: Identify Legal Actions, Repossession	ns and Foreclosures				
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.	cases, small claims action	s, divorces, collection	on suits, paternity a	ctions, suppor	t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt. Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	N. T. T. T.	erty repossessed, f		shed, attached	
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment become No Yes. Fill in the details.		luding a bank or fi	nancial institution	, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess			efit of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Jason J. Shelander

Document Page 34 of 49

Case number (if known)

14.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift or cont			ns with a total	I value of more than	\$600 to any charity?	
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	I	Describe what you contributed		Dates you contributed	Value	
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankrupto or gambling?	y or	since you filed for bankruptcy, did y	ou lose anytl	hing because of the	it, fire, other disaster,	
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.				Date of your loss	Value of property lost	
Par	17: List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or preplication preplication and attorneys, bankruptcy petition preplication. No Yes. Fill in the details.	parin	g a bankruptcy petition?			rty to anyone you	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any prop transferred	Date payment or transfer was made	Amount of payment		
	David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090		Attorney Fees	9/15/16	\$665.00		
17.	Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that you	rs or	to make payments to your creditor		r transfer any prope	rty to anyone who	
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b include both outright transfers and transfers mainclude gifts and transfers that you have alread	u sin e ade a	ess or financial affairs? as security (such as the granting of a s				
	■ No □ Yes. Fill in the details.						
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred		any property or received or debts change	Date transfer was made	

Page 35 of 49 Case number (if known) Document Debtor 1 Jason J. Shelander

19.	 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 						
	Name of trust Description and value of the property transferred						
Par	8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Storage I	Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated No	or other financial accou	nts; certificates of dep				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution	year before you filed for Who else had acc		deposit box or other depos	itory for securities, Do you still		
	Address (Number, Street, City, State and ZIP Code)	Address (Number, S State and ZIP Code)		ibe the contents	have it?		
	Have you stored property in a storage unit o ■ No □ Yes. Fill in the details.	or place other than your	home within 1 year b	efore you filed for bankrupto	cy?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		ribe the contents	Do you still have it?		
Par	9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any property you	borrowed from, are storing f	or, or hold in trust		
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		ribe the property	Value		
Par	10: Give Details About Environmental Info	ormation					

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Jason J. Shelander

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Status of the **Case Title** Court or agency Nature of the case **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number Business Name** Describe the nature of the business **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code)

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Debtor 1 Jason J. Shelander

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Case number (if known)

Part 1	2: Sign Below		
are tru with a	e and correct. I under	tand that making a false statement, concealing pesult in fines up to \$250,000, or imprisonment fo	ments, and I declare under penalty of perjury that the answers property, or obtaining money or property by fraud in connection r up to 20 years, or both.
/s/ Ja	ason J. Shelander		
Jaso	n J. Shelander	Signature of Debto	2
Signa	ture of Debtor 1	-	
Date	December 14, 2010	Date	
Did yo	ou attach additional pag	ges to Your Statement of Financial Affairs for Inc	ividuals Filing for Bankruptcy (Official Form 107)?
No			
□ Yes	3		
Did yo	ou pay or agree to pay	comeone who is not an attorney to help you fill o	ut bankruptcy forms?
No			
П Удс	Name of Person	Attach the Rankruntcy Petition Prenarer's Notice	Declaration and Signature (Official Form 119)

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Debtor 1	Jason J. Sheland	er		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Inited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
known)				☐ Check if this is at amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

	Case 16-39328	Doc 1	Filed 12/14/16 Document	Entered 12/14/16 12:4 Page 39 of 49	7:24 Desc Main	2/14/16 12:22F
Debtor 1	Jason J. Shelander			Case number (if kno	own)	
name:			☐ Retain	the property and redeem it.	☐ Yes	
Descript	tion of			he property and enter into a		
property				mation Agreement. he property and [explain]:		
securing				по ргоротту или [охрішіт].		
	List Your Unexpired Person					
n the infor	rmation below. Do not list	real estate l	eases. Unexpired lease	G: Executory Contracts and Unexpess are leases that are still in effect; oes not assume it. 11 U.S.C. § 365(the lease period has not ye	
Describe y	your unexpired personal p	property leas	ses		Will the lease be assum	ed?
Lessor's na	ame:				□ No	
_ '	n of leased					
Property:					☐ Yes	
Lessor's na					□ No	
Property:	n of leased				☐ Yes	
Lessor's na	ame [.]				□ No	
	n of leased				□ NO	
Property:					☐ Yes	
Lessor's na	ame:				□ No	
Description Property:	n of leased					
riopeity.					☐ Yes	
Lessor's n					□ No	
Description Property:	n of leased				☐ Yes	
Lessor's na	ame:				□ No	
	n of leased				□ NO	
Property:					☐ Yes	
Lessor's na					□ No	
Description Property:	n of leased					
гторену.					☐ Yes	
Part 3:	Sign Below					
Jnder pen			licated my intention ab	oout any property of my estate that	t secures a debt and any per	sonal
Jnder pen	alty of perjury, I declare th		licated my intention at	oout any property of my estate that	secures a debt and any per	sc

property that is subject to an unexpired lease.

X Signature of Debtor 2 X /s/ Jason J. Shelander Jason J. Shelander Signature of Debtor 1

Date December 14, 2016 Date

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-39328 Doc 1 Filed 12/14/16 Entered 12/14/16 12:47:24 Desc Main Document Page 44 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Jason J. Shel	ande	er			Case	No.		
					Debtor(s)	Chap	oter	7	
	DIS	CL	OSU]	RE OF CO	OMPENSATION OF A	TTORNEY FOI	R DI	ЕВТО	OR(S)
	Pursuant to 11 U .S. compensation paid to	C. § 3 o me v	329(a) a within o	and Fed. Bankr. one year before	P. 2016(b), I certify that I am the the filing of the petition in band applation of or in connection with	ne attorney for the above kruptcy, or agreed to be	e nan paid	ned debt	tor(s) and that
	For legal service	es, I h	nave ag	reed to accept_		\$		(665.00
	Prior to the filir	ng of t	this stat	tement I have r	eceived	\$			665.00
									0.00
2.	The source of the co	mpen	sation j	paid to me was	:				
	Debtor		Othe	r (specify):					
3.	The source of compe	ensatio	on to be	e paid to me is:	:				
	Debtor		Othe	r (specify):					
4.	■ I have not agree	d to sl	hare the	e above-disclos	sed compensation with any other	person unless they are	mem	bers and	d associates of my law firm
					compensation with a person or post the names of the people sharing				ciates of my law firm. A
5.	In return for the abo	ve-dis	sclosed	fee, I have agr	reed to render legal service for al	l aspects of the bankru	ptcy o	case, inc	eluding:
1	b. Preparation and to Representation of d. [Other provision: Negotiation agreemer	filing of the cost as no ons worth the cost of the cos	of any placed and the debtor and debtor and debtor and debt of the	petition, scheduled the meeting of the meeting of the meeting of the course of the cou	and rendering advice to the debtoules, statement of affairs and pla of creditors and confirmation heators to reduce to market val needed; preparation and fill goods.	n which may be require aring, and any adjourne ue; exemption plan	ed; ed hea ning;	rings the	ereof;
6.	Represen	tatio	n of th		closed fee does not include the for any dischargeability action roceeding.		danc	es (exc	cept in Chapter 13
					CERTIFICATION				
	I certify that the fore pankruptcy proceeding		; is a co	omplete stateme	ent of any agreement or arranger	nent for payment to me	of for r	epresen	tation of the debtor(s) in
D	ecember 14, 2010	3			/s/ David N				
D	Oate (David M. S Signature of David M. S	•			

790 Chaddick Drive Wheeling, IL 60090 (847) 520-8100 Name of law firm

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

- a) Debts for most taxes;
- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

H.	The FLAT FEE for	representation in this matter will be \$	1000.00
Client ac opportun	knowledge that he or she l ity to ask questions regard	has read this agreement in its entirety, understa	nds it fully, has had an epts it in its entirety.
Date: 9	15-16	Signed:	
		Print: Joson S	helander
Date:	- 	Signed:	
		Print:	
Date:	115116	Signed:	

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United States Bankruptcy Court Northern District of Illinois

		1 (of the first let of infloid		
In re	Jason J. Shelander		Case No.	
		Debtor(s)	Chapter	7
	VE	CRIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	14
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	ors is true and	correct to the best of my
Date:	December 14, 2016	/s/ Jason J. Shelander Jason J. Shelander Signature of Debtor		

Advocate Good Shepherd Hospital 450 West Highway 22 Barrington, IL 60010

Advocate Health Care PO Box 4248 Carol Stream, IL 60197-4248

Associates in Nephrology, SC 2100 S Des Plaines, 1st Floor Chicago, IL 60661

Barrington Anes Assoc. PO Box 66202 Chicago, IL 60666

Best Buy Credit Services PO Box 78009 Phoenix, AZ 85062-8009

Best Buy/CBNA PO Box 6497 Sioux Falls, SD 57117-6497

Cap1/BSTBY PO Box 30253 Salt Lake City, UT 84130

Cardiothoracic & Vascular Surgical PO Box 3722 Springfield, IL 62708-3722

First Bank Card PO Box 2557 Omaha, NE 68103-2557

Integrated Imaging Consultant, LLC 44000 Garfield Road Clinton Township, MI 48038

Lake Zurich Rural Fire Protection PO Box 457 Wheeling, IL 60090-0457

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Orthopaedic Surgery Specialist 1550 N. Northwest Highway Suite 220 Park Ridge, IL 60068

Pulmonary & Critical Care Consultan 700 E Ogden Suite 205 Westmont, IL 60559-1296

State Collection Service 2509 S. Stoughton Road Madison, WI 53716-3314